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SECRETARY OF STATE
ANAMESEE FI ORIDA

COVER LETTER *

TO: Registration Section Division of Corporations		
SUBJECT: AAA Ramos LLC Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.		
Please return all correspondence concerning this ma	atter to the following:	
Harcelo F. Tamayo Name of Person		
AAA ROOS LLC Firm/Company	·	
1040 Crestview Ave		
Laveland F1, 33805 City/State and Zip Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Marcelo F. Tamayo at (L. Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608 liability company submits the following statement in ord agent, or both, in the State of Florida.	508, Florida Statutes, the undersigned limited ler to change its registered office or registered
1. Name of the limited liability company:	Ramos LLC
2. (a) Principal office address of limited liability compan	y: 1046 crestview ave
(Note: MUST BE STREET ADDRESS)	Lakeland Fl 33805
(b) Mailing address of limited liability company:	1046 crestview ave
(Note: MAY BE POST OFFICE BOX)	Lakeland FI 33805
3. Date of filing/registration in Florida	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Corporation Berince Compan
Registered Office Address:	1201 Hays Street 7 Tallahassee Figgs 201
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address
NEW Registered Agent:	Harcelo F. Tamayo
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1046 crestiles ave:
If the limited liability company is not organized under the confirmed that after the change or changes are made, the land the business office of the registered agent will be identiability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.	Florida street address of the registered office stical. Or, in the case of a Florida limited s) was/were authorized by an affirmative vote erwise provided in the articles of organization
Signature of a member or authorized representative of a member	_
Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the provisions of all statutes relative to the provision of any part of the provision of my part of the provision of	— agree to act in this capacity. I further agree to roper and complete performance of my duties, osition as registered agent as provided for in erely reflect a change in the registered office ny has been notified in writing of this change.
Signature of Registered Agent	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)